

Center for Medicare & Medicaid Innovation

State Innovation Models Initiative

Funding available: \$225M for up to 5 states, awards will range from \$20 to \$60M for three-year design testing. Awards will be made in November.

Purpose: Align with commercial payers in order to achieve and sustain lower costs and improved quality for Medicaid and Medicare through multi-payer plan to reform healthcare payment and delivery systems.

Maine's Platform: This model will leverage the successes of MaineCare, the Maine Health Management Coalition and Maine Quality Counts! as conveners of one of the country's few multi-payer Patient-Centered Medical Home Pilots. The Pilot incorporates Community Care Teams that build off Jeff Brenner's "Hot-spotting" approach to target super utilizer patients. Maine's proposal will bring the state's investment to the next level through the formation of multi-payer Accountable Care Organizations that commit to value- and performance-based payment reform and public reporting of common quality benchmarks.

System Transformation: Across Maine, health systems and safety net providers are forming partnerships to take responsibility for the quality and cost outcomes of patients through discreet initiatives under commercial payers, Medicare and Medicaid. This model leverages the purchasing power of the larger health care market by the alignment of goals, measures, and payment and delivery reform.

Behavioral Health: Through the Coalition, providers statewide have been engaging in structured discussion on the necessary steps to reform payment and reduce healthcare costs. One key finding has been the need to reduce costs for behavioral health. This grant will enable the state to conduct a Behavioral Health Cost Workgroup to craft a vision and plan, along with the resources necessary to achieve further integration with physical health through quality improvement and seamless communication through Health Information Technology.

Personal Accountability: Increased patient accountability is critical to system reform across payers. This model will engage patients through new incentives and benefit designs, shared decision making on preference-sensitive care and end of life decisions, wellness programs, and public education.

What it will Fund:

- The data analytic infrastructure for providers and purchasers necessary for multi-payer claims analysis, public reporting, and secure information sharing.
- Quality Improvement support, training, and collaborative learning to achieve the provision of accountable care.
- Support for purchaser-led payment reform, including the potential for investment in performance-based shared savings payments.
- Patient shared decision-making training and tools, wellness programs, benefit design.

Measure of Success: A principle objective of this grant is to achieve a transparent understanding of the costs and quality outcomes of patients across payers, statewide. This knowledge, together with a robust evaluation built into the grant, will enable the state to determine the impact of its reforms.